

LREG 01/96

HAWAII STATE ETHICS COMMISSION 1001 BISHOP STREET, PACIFIC TOWER 970 P.O. BOX 616, HONOLULU, HAWAII 96809 TEL: 587-0460 FAX: 587-0470

RECEIVED

LOBBYIST REGISTRATION FORM (See back of this form for instructions)

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	(See back of this form	Clearly	V 1V	
PART L LORDVICT				
NAME(Last)			STATE	UP HATTAN
	(First)	(Middle)	STAILEIP	HES EAMNISSION
KANEKO	WILLTAM	M .		524-1800
MAILING ADDRESS (Street)		(City)	(State)	(Zip Code)
18th Floor, American 1001 Bishop Street	Savings Bank Tower,	Honolulu	Ĥawáii	96813
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby) TELEPHONE				
		ness entity which has been rete	lined to lobby)	TELEPHONE
ALSTON HUNT FLOYD & .	LNG			524-1800
MAILING ADDRESS (Street) 18th Floor, American	Savings Bank Morros	(City)	(State)	(Zip Code)
1001 Bishop Street	barrigs bank lower,	нопотити	Hawaii	96813
	A-4			
PART II ORGANIZATION				
NAME OF ORGANIZATION YOU LO				TELEPHONE
HAWAII AIR AMBULANCE	, INC.			(415)
MAILING ADDRESS (Street)		(City)	(State)	479-7902 (Zip Code)
70 Mitchell Boulevard		•	(======)	(Zip Oode)
San Rafael, CA 94903				
NAME OF PERSON RESPONSIBLE	-OR PREPARING ORGANIZATION'S	S EXPENDITURES STATEMEN	i	TELEPHONE
ANDREW M. KLUGER				(415)
MAILING ADDRESS (Street)		(City)	(State)	479-7902 (Zip Code)
70 Mitchell Boulevard San Rafael, CA 94903			, ,	
San Rafael, CA 94903	}			
PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY				
Agriculture				
Agriculture	Education	Human Services	Sc Er	cience, Technology & conomic Development
Communications &	Government Operations &	Intergovernmental Relati		ourism & Recreation
Public Utilities	Finance	International Affairs		
Consumer Protection & Commerce	Hawalian Affairs	Labor & Employment	[ansportaion
Culture, Arts, Historic	Health	Planning, Land & Water		decem dissertion to the land
Preservation		Use Management		her: (indicate below)
Ecology, Energy, Environmental Protection	Housing	Public Safety & Correction	ons	Mark Mark Water State Control of the
ENVIOLIMENTAL PROTECTION			# METER 1000	THE RESIDENCE PROPERTY OF THE
PART IV CERTIFICATION	OF LOBBYIST			
Thereby certify that the into	ormation furnished above is, t	to the best of my knowled	lge, correct	and complete
11/1111	game /	ullund	3/27/0	23
(Si	nature of Lobbyist)		(Date)	
PART V AUTHORIZATION NAME	I TO LOBBY		And the second s	
IAMINIC:		TITLE OF AUTHORIZING OFF	ICER OR PER	ISON REPRESENTED
ANDREW M. KLUGER	•	Chairman and CEO		
NAME OF ORGANIZATION (if applica	rple)			TELEPHONE
HAWAII AIR AMBULANO	E, INC.			(415)
MAILING ADDRESS (Street)		(City)	(State)	479-7902 (Zip Code)
70 Mitchell Bouleva	rd, #202	\	((2.15 5000)
San Rafael, CA 949	03			
I hereby authorize the above -named person to engage in lobbying activities on behalf of the undersigned.				
() () () () ()	Olla		4127/2	3
(Signature of Author	izing Officer or Person Represented	1)	(Date)	<i>J.</i> ,